

ISSUE SLIP STATE ARFA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	M.G.		8/12/99
O.I.P.E. CLASSIFIER		18	8-18-99
FORMALITY REVIEW	M.M.	7162P	8-26-99

INDEX OF CLAIMS

✓ ..... Rejected      N ..... Non-elected  
 = ..... Allowed      I ..... Interference  
 - (Through numeral) ... Canceled      A ..... Appeal  
 ÷ ..... Restricted      O ..... Objected

Claim	Date
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Claim	Date
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Claim	Date
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If more than 150 claims or 10 actions  
 staple additional sheet here

Best Available Copy